								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001									10006525				
			1000 62 67										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			30				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		• 10			X\$ 9=		OR	X\$18=	180	
INDEPENDENT CLAIMS			4 minus 3 =		•		I	X42=		OR	X84=	84	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=		
* if	the difference	in column 1 is	ess than zero, enter "0" in column 2			ı	TOTAL		OR	TOTAL	1804		
CLAIMS AS AMENDED - PART II											OTHER		
12	304	(Column 1)	(Column 2			(Column 3)	Column 3) SMALL		ENTITY	OR	SMALL		
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 30	Minus	**	30	= /.		X\$ 9=		OR	X\$18=		
AME	Independent	· 4	Minus	***	4	= /		X42=		OR	X84=	:	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140=	* 5	OR	+280=		
								TOTA	The state of the state of the	00	TOTAL		
(Column 1) **** (Column 2) (Column 3)								DDIT. FEI خاند		1011	addit. Fee		
		CLAIMS		HIGH	HEST		Г					ADDI-	
ENDMENT B		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	*	Minus	**	30	=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	###	4	]=	I	X42=		OR	X84=		
Ц	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140=		OR	+280=		
							L	TOTA		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
0		CLAIMS REMAINING		HIGH	HEST IBER	1	Г		ADDI-	7		ADDI-	
AMENDMENT C		AFTER AMENDMENT		PREVI	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		= ;		X\$ 9=	1	OR	X\$18=		
	Independent	•	Minus	***		-		X42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE										OR	ADDIT. FEE		
	The "Highest Nur	nber Previously Pa	id For* (Total	or Indepen	dent) is th	e highest numb	er fou	nd in the a	ppropriate bo	x in co	dumn 1.		